

QUARTERLY STATEMENT

As of March 31, 2019

of the Condition and Affairs of the

APPALACHIAN INSURANCE COMPANY

NAIC Group Code.....0065, 0065

(Current Period) (Prior Period)

NAIC Company Code..... 10316

Employer's ID Number..... 05-0284861

Organized under the Laws of RI

State of Domicile or Port of Entry RI

Country of Domicile US

Incorporated/Organized..... April 14, 1941

270 Central Avenue .. Johnston .. RI .. US .. 02919-4949

Commenced Business..... January 1, 1942

Statutory Home Office

(Street and Number)

(City or Town, State, Country and Zip Code)

Main Administrative Office

270 Central Avenue .. Johnston .. RI .. US .. 02919-4949 (City or Town, State, Country and Zip Code) (Street and Number)

401-275-3000 (Area Code) (Telephone Number)

Mail Address

P.O. Box 7500 .. Johnston .. RI .. US .. 02919-0750 (Street and Number or P. O. Box)

(City or Town, State, Country and Zip Code)

Primary Location of Books and Records

Name

270 Central Avenue .. Johnston .. RI .. US .. 02919-4949

401-275-3000

(Street and Number)

(City or Town, State, Country and Zip Code)

(Area Code) (Telephone Number)

Internet Web Site Address Statutory Statement Contact www.fmglobal.com

Jeffrey Black

401-415-1559

(Name)

(Area Code) (Telephone Number) (Extension)

jeffrey.black@fmglobal.com

401-946-8306 (Fax Number)

(E-Mail Address)

OFFICERS

1. Thomas Alan Lawson 3. Theresa Ann Mollov

Chairman & Chief Executive Officer Vice President & Controller

Title

2. Jonathan Irving Mishara 4. Denise Anastasia Hebert

Title Senior Vice President & Secretary Vice President & Treasurer

OTHER

Bret Nils Ahnell Malcolm Craig Roberts Sanjay Chawla Michael Robert Turner

Executive Vice President Executive Vice President Senior Vice President **Executive Vice President**

Kevin Scott Ingram Christopher Johnson Jonathan Irving Mishara Deanna Ruth Fidler

Executive Vice President Executive Vice President Senior Vice President Senior Vice President

DIRECTORS OR TRUSTEES

Frank Thomas Connor John Anderson Luke Jr Israel Ruiz

Colin Richard Day Gracia Catherine Martore Michel Giannuzzi

Daniel Lee Knotts Christine Mary McCarthy Glenn Rodney Landau

Thomas Alan Lawson Stuart Blain Parker **David Thomas Walton**

State of Rhode Island County of..... Providence

The officers of this reporting entity being duly swom, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)	(Signature)
Thomas Alan Lawson	Jonathan Irving Mishara	Theresa Ann Molloy
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
Chairman & Chief Executive Officer	Senior Vice President & Secretary	Vice President & Controller
(Title)	(Title)	(Title)
Subscribed and sworn to before me This 10th day of May 2019 John A. Soares III Notary Public Expires July 5, 2021	a. Is this an original filing? b. If no: 1. State the amendment numbe 2. Date filed 3. Number of pages attached	Yes [X] No []

		1	Current Statement Date	2	4
		Assets	Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	204,668,304		204,668,304	206,697,728
2.	Stocks:				
	2.1 Preferred stocks	2,500,000		2,500,000	2,500,000
	2.2 Common stocks			0	
3.	Mortgage loans on real estate:				
	3.1 First liens			0	
	3.2 Other than first liens			0	
4.	Real estate:				
	4.1 Properties occupied by the company (less \$0 encumbrances)			0	
	4.2 Properties held for the production of income (less \$0 encumbrances)			0	
	4.3 Properties held for sale (less \$0 encumbrances)			0	
5.	Cash (\$7,784,475), cash equivalents (\$36,592,177)	44.070.050		44.070.000	F2 000 040
_	and short-term investments (\$0)				
6.	Derivatives				
7. 8.	Other invested assets				
9.	Other invested assets				
10.	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)				
13.	Title plants less \$0 charged off (for Title insurers only)				
14.	Investment income due and accrued				
15.	Premiums and considerations:				1,000,210
	15.1 Uncollected premiums and agents' balances in the course of collection	17.254.153		17.254.153	18.153.849
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)	, ,,		0	
	15.3 Accrued retrospective premiums (\$0) and contracts subject to redetermination (\$0).				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	558,449		558,449	600,457
	16.2 Funds held by or deposited with reinsured companies			0	
	16.3 Other amounts receivable under reinsurance contracts			0	
17.	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon	4,027,299		4,027,299	4,530,289
18.2	Net deferred tax asset	302,000	220,000	82,000	79,000
19.	Guaranty funds receivable or on deposit			0	
20.	Electronic data processing equipment and software			0	
21.	Furniture and equipment, including health care delivery assets (\$0)			0	
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	
23.	Receivables from parent, subsidiaries and affiliates			0	1,112,261
24.	Health care (\$0) and other amounts receivable			0	
25.	Aggregate write-ins for other than invested assets	14,775	0	14,775	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25)	280,131,317	220,000	279,911,317	292,555,978
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
28.	Total (Lines 26 and 27)	280,131,317	220,000	279,911,317	292,555,978
	DETAILS O	F WRITE-INS			
1101				0	
1102				0	
1103				0	
1198	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199	Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0
2501	Cash Clearing Accounts	14,775		14,775	
2502				0	
	Summary of remaining write-ins for Line 25 from overflow page				
	Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)				

Statement for March 31, 2019 of the APPALACHIAN INSURANCE COMPANY LIABILITIES, SURPLUS AND OTHER FUNDS

	EIABIEITIEG, GORI EGG AND GITTERT		
		1 Current Statement Date	2 December 31 Prior Year
1.	Losses (current accident year \$0)	60,108,430	60,130,850
2.	Reinsurance payable on paid losses and loss adjustment expenses	10,731,634	32,260,736
3.	Loss adjustment expenses	8,271,714	8,289,103
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	400	400
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))		
7.2	Net deferred tax liability		
8.	Borrowed money \$0 and interest thereon \$0.		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$0 and including warranty reserves of \$0 and accrued accident and health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health Service Act)		
10.	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated	4,522	
16.	Provision for reinsurance (including \$0 certified)	841,000	841,000
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates	5,439,728	
20.	Derivatives		
21.	Payable for securities		
22.	Payable for securities lending		
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$0 and interest thereon \$0.		
25.	Aggregate write-ins for liabilities	10.253	120
			120
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27).		
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock		
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds	0	0
33.	Surplus notes		
34.	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)	178,288,233	176,273,071
36.	Less treasury stock, at cost:		
	36.10.000 shares common (value included in Line 30 \$0)		
	36.20.000 shares preferred (value included in Line 31 \$0)		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)	189,390,761	187,375,599
38.	Totals (Page 2, Line 28, Col. 3)	279,911,317	292,555,978
0504	DETAILS OF WRITE-INS	40.050	400
2501. 2502.	Miscellaneous Accounts Payable	10,253	120
2503.			
2598. 2599.	Summary of remaining write-ins for Line 25 from overflow page		0
2901.	Totals (Lines 2001 und 2000 plus 2000) (Line 20 above)		120
2902.			
2903. 2998.	Summary of remaining write-ins for Line 29 from overflow page		0
2999.	Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)	0	0
3201. 3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page		0
3299.	Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above)	<u> </u> 0	0

_	STATEMENT OF INCO			
		1	2	3
		Current Year to Date	Prior Year	Prior Year Ended
		to Date	to Date	December 31
	UNDERWRITING INCOME			
1.	Premiums earned:			
	1.1 Direct(written \$0)			
	1.2 Assumed (written \$17,254,153)		, ,	, ,
	1.3 Ceded (written \$10,000)			
		17,244,100	10,407,911	09,074,377
2	DEDUCTIONS: Losses incurred (current accident year \$0):			
۷.	2.1 Direct			
	2.2 Assumed.			
	2.3 Ceded		, ,	
	2.4 Net			
3.	Loss adjustment expenses incurred			
	Other underwriting expenses incurred			
	Aggregate write-ins for underwriting deductions.			
	Total underwriting deductions (Lines 2 through 5)			
	Net income of protected cells			
8.	Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	1,200,265	(2,036,865)	(27,706,119
	INVESTMENT INCOME	, ,	(, , , ,	
0	Net investment income earned	1 504 042	1 405 050	6 101 207
	Net realized capital gains (losses) less capital gains tax of \$(62,000)			
	Net realized capital gains (losses) less capital gains tax of \$(62,000)			
11.		1,300,045	1,488,707	
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off			
	(amount recovered \$0 amount charged off \$0)			
	Finance and service charges not included in premiums			
	Aggregate write-ins for miscellaneous income			0
	Total other income (Lines 12 through 14)	0	0	0
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and			
	foreign income taxes (Lines 8 + 11 + 15)			
	Dividends to policyholders			
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and			
	foreign income taxes (Line 16 minus Line 17)			
	Federal and foreign income taxes incurred			
20.	Net income (Line 18 minus Line 19) (to Line 22)	1,995,320	(422,158)	(17,109,228)
	CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year	187.375.599	204.433.847	204.433.847
	Net income (from Line 20)			
	Net transfers (to) from Protected Cell accounts.			
	Change in net unrealized capital gains or (losses) less capital gains tax of \$4,000			
	Change in net unrealized foreign exchange capital gain (loss)			
	Change in net deferred income tax			
27.	Change in nonadmitted assets	29,000	(11,000)	34,000
28.	Change in provision for reinsurance			55,842
29.	Change in surplus notes			
30.	Surplus (contributed to) withdrawn from protected cells			
31.	Cumulative effect of changes in accounting principles			
32.	Capital changes:			
	32.1 Paid in			
	32.2 Transferred from surplus (Stock Dividend)			
	32.3 Transferred to surplus			
33.	Surplus adjustments:			
	33.1 Paid in			
	33.2 Transferred to capital (Stock Dividend)			
_	33.3 Transferred from capital			
	Net remittances from or (to) Home Office			
	Dividends to stockholders			
	Change in treasury stock			
	Aggregate write-ins for gains and losses in surplus			0
	Change in surplus as regards policyholders (Lines 22 through 37)			
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	189,390,761	204,002,619	187,375,599
	DETAILS OF WRITE-INS			
		1		
0502.				
0502. 0503.				
0502. 0503. 0598.	Summary of remaining write-ins for Line 5 from overflow page.		0	0
0502. 0503. 0598. 0599.	Summary of remaining write-ins for Line 5 from overflow page		0	0
0502. 0503. 0598. 0599.	Summary of remaining write-ins for Line 5 from overflow page		0	0
0502. 0503. 0598. 0599. 1401. 1402.	Summary of remaining write-ins for Line 5 from overflow page Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)		0	0
0502. 0503. 0598. 0599. 1401. 1402. 1403.	Summary of remaining write-ins for Line 5 from overflow page Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)		0	0
0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498.	Summary of remaining write-ins for Line 5 from overflow page Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)		0	0
0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498.	Summary of remaining write-ins for Line 5 from overflow page Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above) Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)		0	0 0 0 0
0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498. 1499. 3701.	Summary of remaining write-ins for Line 5 from overflow page Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above) Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)		0	0 0
0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498. 1499. 3701. 3702.	Summary of remaining write-ins for Line 5 from overflow page Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above) Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)			0
0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498. 1499. 3701. 3702. 3703.	Summary of remaining write-ins for Line 5 from overflow page Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above) Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)		0 0 0	0 0
0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498. 1499. 3701. 3702. 3703. 3798.	Summary of remaining write-ins for Line 5 from overflow page Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above) Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)			0 0

	1 Current Year	2 Prior Year	3 Prior Year Ended
	to Date	To Date	December 31
CASH FROM OPERATIONS			
Premiums collected net of reinsurance		16,970,803	67,900,593
2. Net investment income		1,369,978	6,360,386
3. Miscellaneous income			
4. Total (Lines 1 through 3)	19,761,767	18,340,781	74,260,979
5. Benefit and loss related payments	31,770,938	26,817,575	68,839,986
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	5,810,105	6,503,663	24,714,016
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)			(7,212,907
10. Total (Lines 5 through 9)	37,581,043	33,321,238	86,341,095
11. Net cash from operations (Line 4 minus Line 10)	(17,819,276)	(14,980,457)	(12,080,116
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	16,496,511	5,272,022	26,011,124
12.2 Stocks			
12.3 Mortgage loans			
12.4 Real estate			
12.5 Other invested assets			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	12,398	(4,069)	4,053
12.7 Miscellaneous proceeds		438,572	
12.8 Total investment proceeds (Lines 12.1 to 12.7)			
13. Cost of investments acquired (long-term only):		, ,	
13.1 Bonds.	14.796.051		14.779.418
13.2 Stocks	,,		
13.3 Mortgage loans			
13.4 Real estate			
13.5 Other invested assets			
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)			14,779,418
14. Net increase or (decrease) in contract loans and premium notes			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)			11,235,759
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		,7 00,020	
16. Cash provided (applied):			
16.1 Surplus notes, capital notes			
16.2 Capital and paid in surplus, less treasury stock			
16.3 Borrowed funds			
16.4 Net deposits on deposit-type contracts and other insurance liabilities			
16.5 Dividends to stockholders			
16.6 Other cash provided (applied)		(16,329,431)	(23 272 070
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6)		• • • • • • •	(23,272,070
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		(10,020,701)	
·	(9,544,297)	(2E 603 363)	(24 116 427
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	(3,544,297)	(∠3,503,363)	(24, 1 10,427
Cash, cash equivalents and short-term investments: 10.1 Registrator of year.	F2 020 040	70 007 070	70 027 27
19.1 Beginning of year		78,037,376	
19.2 End of period (Line 18 plus Line 19.1)	44,370,052	52,434,013	53,920,949

Note 1 - Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices (required NAIC disclosure regardless of whether there is any significant change)

The accompanying financial statements of Appalachian Insurance Company ("Company") have been prepared on the basis of accounting practices prescribed or permitted by the Rhode Island Division of Insurance.

The state of Rhode Island requires insurance companies domiciled in the state of Rhode Island to prepare their statutory financial statements in accordance with the National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual subject to any deviations prescribed or permitted by the Rhode Island Division of Insurance. The Company has no state prescribed or permitted practices.

		SSAP	F/S	F/S		
		#	Page	Line #	Current Year to Date	2018
NET	INCOME					
(1)	The Company state basis					
	(Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 1,995,320	\$ (17,109,228)
(2)	State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
					\$ -	\$ -
(3)	State Permitted Practice that are an increase/(decrease) from NAIC SAP					
					\$	\$
(4)	NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 1,995,320	\$ (17,109,228)
SUF	RPLUS					
(5)	The Company state basis					
	(Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 189,390,761	\$ 187,375,599
(6)	State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
					\$ -	\$ -
(7)	State Permitted Practice that are an increase/(decrease) from NAIC SAP					
					\$	\$
(8)	NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 189,390,761	\$ 187,375,599

B. Use of Estimates

No significant changes.

- C. Accounting Policy
 - (1) No significant changes.
 - (2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method (required NAIC disclosure regardless of whether there is any significant change)

Non loan-backed bonds with NAIC designations 1 or 2 are stated at amortized cost using the interest method. Non loan-backed bonds with NAIC designations of 3 through 6 are stated at the lower of amortized value or fair value. See paragraph 6 for loan-backed and structured securities.

(3) - (5)

No significant changes.

(6) Basis for Loan-Backed Securities and Adjustment Methodology (required NAIC disclosure regardless of whether there is any significant change)

U.S. government agency loan-backed and structured securities are valued at amortized value. Other loan-backed and structured securities are valued at either amortized value or fair value, depending on many factors including: type of underlying collateral, whether modeled by NAIC vendor, whether rated (by either NAIC approved rating organization or NAIC Securities Valuation Office), and relationship of amortized value to par value and amortized value to fair value.

(7) - (13)

No significant changes.

D. Going Concern (required NAIC disclosure regardless of whether there is any significant change)

Based upon its evaluation of relevant conditions and events, management has concluded that the Company will continue as a going concern.

Note 2 – Accounting Changes and Corrections of Errors

Not applicable.

Note 3 - Business Combinations and Goodwill

Not applicable.

Note 4 - Discontinued Operations

Not applicable.

Note 5 - Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

No significant changes.

B. Debt Restructuring

No significant changes.

C. Reverse Mortgages

No significant changes.

- D. Loan-Backed Securities (required NAIC disclosure regardless of whether there is any significant change)
 - (1) Description of Sources Used to Determine Prepayment Assumptions

Loan-backed bonds and structured securities are valued at amortized cost using the constant interest rate method, and using an effective yield based on current prepayment assumptions obtained from Bloomberg, rather than anticipated prepayments at the date of purchase. Prepayment assumptions are reviewed periodically and updated in response to changes in market interest rates.

(2) Securities with Recognized Other-Than-Temporary Impairment

Not applicable.

(3) Recognized OTTI securities

Not applicable.

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a.	The aggregate amount of unrealized losses:	1. Less than 12 Months	\$ -
		2. 12 Months or Longer	\$ 15,181
b.	The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ -
		2. 12 Months or Longer	\$ 4,983,150

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary

All loan-backed and structured securities in an unrealized loss position were reviewed to determine whether other-than-temporary impairments should be recognized. The Company asserts that it has the intent and ability to hold these securities long enough to allow the cost basis of these securities to be recovered. These conclusions are supported by a detailed analysis of the underlying credit and cash flows of each security. Unrealized losses are primarily attributable to credit spread widening and increased liquidity discounts. It is possible that the Company could recognize other-than-temporary impairments in the future on some of the securities, if future events, information and the passage of time causes it to conclude that declines in value are other-than temporary.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
 - (1) Policies Requiring Collateral

No significant changes.

(2) Collateral Pledged

No significant changes.

- (3) Collateral Received
 - a. Aggregate Amount of Cash Collateral Received

No significant changes.

The fair value of that collateral and of the portion of that collateral that it has sold or repledged (required NAIC disclosure regardless of whether there is any significant change)

\$ 5,112,875

c. Information About Sources and Uses of Collateral

No significant changes.

(4) Aggregate Value of the Reinvested Collateral

No significant changes.

- (5) Collateral Reinvestment
 - a. Aggregate Amount of Cash Collateral Reinvested

No significant changes.

Note 5 - Investments (continued from preceding page)

b. Explanation of Additional Sources of Liquidity for Maturity Date Mismatches

No significant changes.

(6) Detail on Collateral Transactions Not Permitted by Contract or Custom to Sell or Repledge

No significant changes.

(7) Collateral for Securities Lending Transactions that Extend Beyond One Year From the Reporting Date

No significant changes.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

H. Repurchase Agreements Transactions Accounted for as a Sale (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

J. Real Estate

Not applicable.

K. Low-Income Housing Tax Credits (LIHTC)

Not applicable.

L. Restricted Assets

No significant changes.

M. Working Capital Finance Investments (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

N. Offsetting and Netting of Assets and Liabilities (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

O. Structured Notes

Not applicable.

P. 5GI* Securities

Not applicable.

Q. Short Sales

Not applicable.

R. Prepayment Penalty and Acceleration Fees

No significant changes.

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

Note 7 - Investment Income

No significant changes.

Note 8 - Derivative Instruments

Not applicable.

Note 9 - Income Taxes

No significant changes.

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant changes.

Note 11 - Debt

A. Debt Including Capital Notes

Not applicable.

B. FHLB (Federal Home Loan Bank) Agreements (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

(1) - (3)

No significant changes.

(4) Components of Net Periodic Benefit Cost (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

(5) - (21)

No significant changes.

B. Description of Investment Policies

Not applicable.

C. Fair Value of Plan Assets

Not applicable.

D. Rate of Return Assumptions

Not applicable.

E. Defined Contribution Plans

No significant changes.

F. Multiemployer Plans

Not applicable.

G. Consolidated/Holding Company Plans

No significant changes.

H. Postemployment Benefits and Compensated Absences

Not applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits

Not applicable.

Note 13 - Capital and Surplus, Shareholder's Dividend Restrictions and Quasi-Reorganizations

No significant changes

Note 14 - Liabilities, Contingencies and Assessments

No significant changes

Note 15 – Leases

No significant changes

Note 16 - Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

No significant changes

Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

Transfers of Receivables Reported as Sales

Not applicable.

- B. Transfer and Servicing of Financial Assets
 - (1) Loaned Securities

No significant changes.

(2) Servicing Assets and Servicing Liabilities (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

(3) Servicing Assets and Liabilities Subsequently Measured at Fair Value

Not applicable.

(4) Securitizations, Asset-Based Financing Arrangements and Similar Transfers Accounted for as Sales (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

(5) Transfers of Financial Assets Accounted for as Secured Borrowing

Not applicable.

(6) Transfers of Receivables with Recourse

Not applicable.

(7) Repurchase Agreements

Not applicable.

C. Wash Sales (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

Note 18 - Gain or Loss to the Reporting Entity from Uninsured Plans and the Portion of Partially Insured Plans

Not applicable.

Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

Note 20 – Fair Value Measurements (required NAIC disclosure regardless of whether there is any significant change)

- A. Fair Value Measurements
 - (1) Fair Value Measurements at Reporting Date

The Company categorizes its invested assets that are measured at fair value into the three-level fair value hierarchy or designates certain invested assets as carried at net asset value (NAV). Item 4 provides a discussion of each of these categories.

Description for Each Type of Asset or Liability		Level 1		Level 2		Level 3	N	et Asset Value (NAV)	Total
Assets at Fair Value									
Bonds	\$	-	\$	4,983,150	\$	-	\$	-	\$ 4,983,150
Cash Equivalents	\$	-	\$	-	\$	-	\$	36,592,177	\$ 36,592,177
Total	\$	-	\$	4,983,150	\$	-	\$	36,592,177	\$ 41,575,327
Liabilities at Fair Value									
	\$	-	\$	-	\$	-	\$	-	\$ -
Total	\$	-	\$	-	\$	-	\$	-	\$ -

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

The Company has no assets measured at fair value in the Level 3 category.

(3) Policies when Transfers Between Levels are Recognized

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred into or out of Level 3. The Company has no assets measured at fair value in the Level 3 category.

Note 20 - Fair Value Measurements (continued from preceding page)

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

The valuation techniques required by the Fair Value Measurements guidance (SSAP 100) are based upon observable and unobservable inputs. Observable inputs reflect market data obtained from independent sources, while unobservable inputs reflect market assumptions. These two types of inputs create the following fair value hierarchy:

Level 1 Quoted prices for identical instruments in active markets

Quoted prices for similar instruments in active markets; quoted prices for identical or similar instruments in markets that are not active; and Level 2 model-derived valuations whose inputs are observable or whose significant value drivers are observable

Level 3 Significant inputs to the valuation model are unobservable

The Company elects to use NAV for all money market mutual funds in lieu of fair value as NAV is more readily available. These funds are backed by high quality, very liquid short-term instruments and the probability is remote that the funds would be sold for a value other than NAV.

The Company retains independent pricing vendors to assist in valuing invested assets when the prices are not available from the SVO.

When available, the Company uses quoted market prices to determine the fair value of investment securities, and they are included in Level 1.

When quoted market prices are unavailable, the Company uses quotes from independent pricing vendors based on recent trading activity and other relevant information, including market interest rate curves, referenced credit spreads and estimated prepayment rates, where applicable. These investments are included in Level 2 and are primarily comprised of fixed income securities which are NAIC rated 3 or below.

In infrequent circumstances, the pricing is not available from the pricing vendor and is based on significant unobservable inputs. In those circumstances, the investment security is classified in Level 3. There are no Level 3 investments at reporting date.

(5) Fair Value Disclosures

Not applicable.

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

Not applicable.

C. Fair Value Level

> The table below reflects the fair value and admitted values of all admitted assets and liabilities that are financial instruments. The fair values are also categorized into the three-level fair value hierarchy as described in Note 20A.

	Α	ggregate Fair						Ne	et Asset Value	١	lot Practicable
Type of Financial Instrument		Value	Ad	mitted Assets	(Level 1)	(Level 2)	(Level 3)		(NAV)	((Carrying Value)
Bonds	\$	205,546,532	\$ 2	204,668,304	\$ -	\$ 204,668,304	\$ -	\$	-	\$	-
Cash, cash equivalents and											
short-term investments	\$	44,376,652	\$	44,376,652	\$ 7,784,475	\$ -	\$ -	\$	36,592,177	\$	-
Securities lending reinvested											
collateral assets	\$	5,112,875	\$	5,112,875	\$ 5,112,875	\$ -	\$ -	\$		\$	-
Total	\$	255,036,059	\$ 2	254,157,831	\$ 12,897,350	\$ 204,668,304	\$ -	\$	36,592,177	\$	-

D. Not Practicable to Estimate Fair Value

Not applicable.

E. **NAV Practical Expedient Investments**

> The Company elects to use NAV for all money market mutual funds in lieu of fair value as NAV is more readily available. These funds are backed by high quality, very liquid short-term instruments and the probability is remote that the funds would be sold for a value other than NAV.

Note 21 - Other Items

Not applicable.

Note 22 - Events Subsequent

No significant changes.

Note 23 - Reinsurance

No significant changes.

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

A-E. Not applicable.

F. Risk Sharing Provisions of the Affordable Care Act (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses (required NAIC disclosure regardless of whether there is any significant change)

No significant changes.

Note 26 – Intercompany Pooling Arrangements

No significant changes.

Note 27 - Structured Settlements

Not applicable.

Note 28 - Health Care Receivables

Not applicable.

Note 29 - Participating Policies

Not applicable.

Note 30 - Premium Deficiency Reserves

No significant changes.

Note 31 - High Deductibles

Not applicable.

Note 32 - Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

Not applicable.

Note 33 - Asbestos/Environmental Reserves

No significant changes.

Note 34 - Subscriber Savings Accounts

Not applicable.

Note 35 - Multiple Peril Crop Insurance

Not applicable.

Note 36 - Financial Guaranty Insurance

A. Financial Guarantee Insurance Contracts

Not applicable.

B. Schedule of Insured Financial Obligations at the End of the Period (required NAIC disclosure regardless of whether there is any significant change)

Not applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	as required by the Model Act?		Yes [1 [No [X]
1.2	If yes, has the report been filed with the domiciliary state?		Yes	[]	No[]
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?		Yes [1 [No [X]
2.2	If yes, date of change:				
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer's lf yes, complete Schedule Y, Parts 1 and 1A.	?	Yes [X]	No []
3.2	Have there been any substantial changes in the organizational chart since the prior quarter end?		Yes [] 1	No [X]
3.3	If the response to 3.2 is yes, provide a brief description of those changes.				
3.4	Is the reporting entity publicly traded or a member of a publicly traded group?		Yes [1 [No [X]
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. —				
4.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.		Yes [] [No [X]
4.2	If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.		2	<u> </u>	n
			2 NAIC	Ş	3
	Name of Entity		ompany Code		te of nicile
5.	If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or				
0.	similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?	V 1	1 N. I		NI/A F 1
	If yes, attach an explanation.	Yes [] No [X J	N/A []
6.1	State as of what date the latest financial examination of the reporting entity was made or is being made.		12/31/20	17	
6.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.		12/31/201	17	
6.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).		12/08/20	18	
6.4	By what department or departments?				
	Rhode Island Division of Insurance				
6.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?	Yes [] No [] N	I/A [X]
6.6	Have all of the recommendations within the latest financial examination report been complied with?	Yes [] No [] N	I/A [X]
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?		Yes [1 [No [X]
7.2	If yes, give full information:				
8.1	Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board?		Yes [1 [No [X]
8.2	If response to 8.1 is yes, please identify the name of the bank holding company.			-	
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?		Yes [1 1	No [X]
8.4	If the response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal			•	
	regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator].				
	1 Affiliate Name Location (City, State) FR				6 SEC
0.4	As the series offers to desire the series of feet series of feet series of the series				
9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?		Yes [X]	No[]
	(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;				
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;				
	(c) Compliance with applicable governmental laws, rules and regulations;(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and				
9 11	(e) Accountability for adherence to the code. If the response to 9.1 is No, please explain:				
V.11					
9.2	Has the code of ethics for senior managers been amended?		Yes [1 [No [X]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).				
9.3	Have any provisions of the code of ethics been waived for any of the specified officers?		Yes [1 [No [X]

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FI	N	Δ	N	C	Δ	I

10.1	Does the	e reporting entity report any amounts due from parent, subsidi	aries or affiliates on Page 2 of this	statement?			Yes[]	No [X]
10.2	If yes, inc	dicate any amounts receivable from parent included in the Pa	ge 2 amount:			\$		0
			INVESTMENT					
11.1		y of the stocks, bonds, or other assets of the reporting entity I nother person? (Exclude securities under securities lending a		ment, or otherwise	made available for		Yes[]	No [X]
11.2	If yes, giv	ve full and complete information relating thereto:						
12.	Amount	of real estate and mortgages held in other invested assets in	Schedule BA:			\$		0
13.	Amount o	of real estate and mortgages held in short-term investments:				\$		0
14.1	Does the	e reporting entity have any investments in parent, subsidiaries	and affiliates?				Yes [X]	No [
	14.2 If y	ves, please complete the following:						
	14.21 14.22	Bonds Preferred Stock			1 ear End Book/Adjus Carrying Value 2,500	0 \$	2 Quarter Book/Adj Carrying Value 2,500	0 0,000
	14.23 14.24	Common Stock Short-Term Investments				0		0
	14.25	Mortgage Loans on Real Estate				0		0
	14.26 14.27	All Other Total Investment in Parent, Subsidiaries and Affiliates (Sul	otatal Lines 14 21 to 14 26)	•	2,500	0 \$	2.50	0,000
	14.28	Total Investment in Parent included in Lines 14.21 to 14.26	,	\$ \$	2,500	0 \$	2,300	0,000
15.1	Has the r	reporting entity entered into any hedging transactions reporte	d on Schedule DB?				Yes[]	No [X
15.2	If yes, ha	as a comprehensive description of the hedging program been	made available to the domiciliary	state?			Yes[]	No [
16. 16.1		eporting entity's security lending program, state the amount or value of reinvested collateral assets reported on Schedule D	ŭ	nent date:		\$	5,1	12,875
16.2	Total boo	ok adjusted/carrying value of reinvested collateral assets repo	orted on Schedule DL, Parts 1 and	2:		\$	5,1	12,875
16.3	Total pay	yable for securities lending reported on the liability page:				\$	5,1	12,875
17.	offices, vicustodial of Critical	g items in Schedule E-Part 3-Special Deposits, real estate, m raults or safety deposit boxes, were all stocks, bonds and othe I agreement with a qualified bank or trust company in accorda Il Functions, Custodial or Safekeeping Agreements of the NAI	er securities, owned throughout the ance with Section 1, III - General E IC Financial Condition Examiners	e current year held xamination Consid Handbook?	pursuant to a lerations, F. Outsou	rcing	Yes [X]	No [
	17.1 Fo	or all agreements that comply with the requirements of the NA	IC Financial Condition Examiners	Handbook, comple	ete the following:	2		
		Name of Custodian(s)			Custo	dian Address		
		JP Morgan Worldwide Securities Services			enue, New York, N	Y 10179		
		or all agreements that do not comply with the requirements of cation and a complete explanation:			provide the name,			
		1 Name(s)	2 Locati			3 Complete Ex		
	17.3 Ha	ave there been any changes, including name changes, in the	custodian(s) identified in 17.1 duri	ng the current qua	rter?		Yes []	No [X]
		yes, give full and complete information relating thereto:						
	Ē	1	2		3		4	
		Old Custodian	New Custodian		Date of Change		Reason	
					g-			
	of t	vestment management – Identify all investment advisors, inve the reporting entity. For assets that are managed internally b curities"].					ccounts", "handle	on behalf
		Name of	1 Firm or Individual				2 Affiliation	
		Sanjay Chawla, SVP, Chief Investment Officer				,	1	
		Daniel Richards, VP, Portfolio Mgr Fixed Income Scott Anthony, VP, Sector Portfolio Mgr Fixed Income					<u> </u>	
		.5097 For those firms/individuals listed in the table for Que manage more than 10% of the reporting entity's as:		ls unaffiliated with	the reporting entity	i.e., designated wi	ith a "U") Yes []	No [
	17.	.5098 For firms/individuals unaffiliated with the reporting emanagement aggregate to more than 50% of the re	entity (i.e., designated with a "U") li	sted in the table fo	r Question 17.5, do	es the total assets		

Legal Entity Identifier (LEI)

Investment

Management

Agreement (IMA) Filed

Yes[X]

No []

Registered With

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

Name of Firm or Individual

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?

Central Registration Depository

Number

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

18.2 If no, list exceptions:

- 19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5*GI security:

 a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 - Issuer or obligor is current on all contracted interest and principal payments.
 - The insurer has an actual expectation of ultimate payment of all contracted interest and principal. Has the reporting entity self-designated 5GI securities?

Yes[] No[X]

- 20. By self-designating PLGI securities, the reporting entity is certifying the following elements for each self-designated PLGI security:
 - The security was purchased prior to January 1, 2018.

 - The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

 The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?

Yes[] No[X]

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled?

GENERAL INTERROGATORIES (continued)

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	If yes, attach an explanation.		
2.	Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?	Yes[]	No [X]
	If yes, attach an explanation.		

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see *Annual Statement Instructions* pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero?

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?

Yes[] No[X]

Yes[] No[X]

Yes[] No[X] N/A[]

4.2 If yes, complete the following schedule:

3.2 If yes, give full and complete information thereto:

1	2	3		Total D	iscount		Discount Taken During Period						
			4	5	6	7	8	9	10	11			
	Maximu												
	m	Disc.	Unpaid	Unpaid			Unpaid	Unpaid					
Line of Business	Interest	Rate	Losses	LAE	IBNR	Total	Losses	LAE	IBNR	Total			
	0.000	0.000	0	0	0	0	0	0	0	0			
Total	XXX	XXX	0	0	0	0	0	0	0	0			

5. Operating Percentages:

	5.1 A&H loss percent		0.000%
	5.2 A&H cost containment percent		0.000%
	5.3 A&H expense percent excluding cost containment expenses		0.000%
6.1	Do you act as a custodian for health savings accounts?	Yes[]	No [X]
6.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$	0
6.3	Do you act as an administrator for health savings accounts?	Yes[]	No [X]
6.4	If yes, please provide the amount of funds administered as of the reporting date.	\$	0
7.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [X]	No []
7.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes[]	No[]

Statement for March 31, 2019 of the APPALACHIAN INSURANCE COMPANY SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

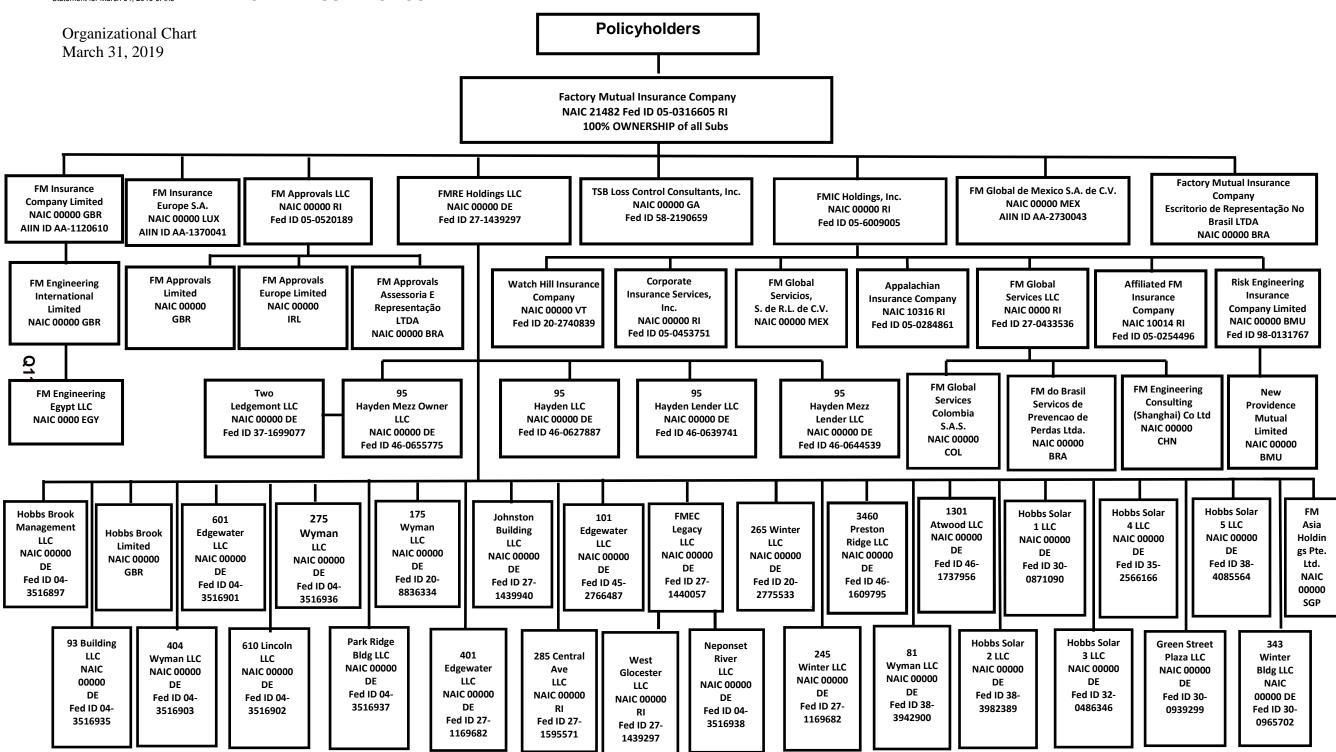
		Showing All New Reinsulers - Current Tear to Da	וכ			
1	2	3	4	5	6	7
						Effective Date
NAIC					Certified	of Certified
Company			Domiciliary	Type of	Reinsurer Rating	Reinsurer
Code	ID Number	Name of Reinsurer	Jurisdiction	Reinsurer	(1 through 6)	Rating
U.S. Insurers	1					
10538	03-0308160	AMERICAN TRIUMVIRATE INSURANCE COMPANY (ATIC)	VT	Unauthorized		
	61-1140366	DRISK INSURANCE INC	UT	Unauthorized		
All Other Insi	urers					
	AA-3191390	CASTLE HARBOUR INUSRANCE LIMITED	BMU	Unauthorized		
						•

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

Direct Premiums Written Direct Losses Paid (Deducting Salvage)

	States, Etc.	Status (a)	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date
1.	AlabamaAL	Ē						
	AlaskaAK							
	ArizonaAZ ArkansasAR							
	CaliforniaCA				40.692			19,418,50
	ColoradoCO	E				,		10,710,00
	ConnecticutCT							
3.	DelawareDE	E						
	District of ColumbiaDC	E						
	FloridaFL	E						492,26
	GeorgiaGA	E					34,023,206	33,546,28
	HawaiiHI IdahoID	E						
	IllinoisIL	E						1.50
	IndianaIN	E						
	lowaIA	E						
7.	KansasKS							
	KentuckyKY	E						
	LouisianaLA						152	40
		E						
	MarylandMD MassachusettsMA	E					4	4
	MichiganMI						11	1
	MinnesotaMN	E					7	
	MississippiMS						4	1
	MissouriMO	E					20,413,857	20,127,71
7.	MontanaMT	E						
		E						
	NevadaNV							
	New HampshireNH							
	New JerseyNJ New MexicoNM	E						
	New YorkNY				11,695	8,003	8,809,980	22,859,97
					11,000			22,000,01
	North DakotaND							
	OhioOH							
	OklahomaOK							
	OregonOR							
	PennsylvaniaPA							76
	Rhode IslandRI South CarolinaSC						2,949	3,16
	South DakotaSD							
	TennesseeTN							
	TexasTX							18.56
	UtahUT						······	······································
	VermontVT							
	VirginiaVA							
	WashingtonWA				1,379	(12,325)		13,242,11
	West VirginiaWV						1,000	1,00
	WisconsinWI							
	WyomingWY American SamoaAS							
	GuamGU							
	Puerto RicoPR							
	US Virgin IslandsVI							
	Northern Mariana IslandsMP							
	CanadaCAN							
8.	Aggregate Other AlienOT	XXX	0			0	0	
9.	Totals	XXX	0		,	25,930	108,377,470	109,712,30
Ω4		vvv		DETAILS OF W	VRITE-INS		1	
		XXX						
		XXX						
998.	Summary of remaining write-ins							
	for Line 58 from overflow page	XXX	0	0	0	0	0	
	Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above)	XXX	0	0	0	0	0	
	Active Status Count	ı		,U				
,	and as Charlesad Hisanaad incurance	carrier or o	lomiciled RRG	1	D Dogistared Non	dominilad PPCs		
Lice	ble - Reporting entities eligible or appro			1_				



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

						PART 1A - DETAIL OF INSU	RANCE	HOLDIN	G COMPANY SYSTEM				
1	2	3	4	5	6 7	8	9	10	11	12	13	14	15 16
					Name of					Type of			
					Securities					Control			
					Exchange					(Ownership	If Control in		ls an SCA
		NAIC			if Publicly Traded	Names of		Relationship		Board, Management,	If Control is Ownership		Filing
Group	Group	Company	ID	Federal	(U.S. or	Parent, Subsidiaries		o Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?
Code	Name	Code	Number		CIK International	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)		Entity(ies)/Person(s)	(Y/N) *
Mem				1	1				(and a second	,	, creaming		(, , , , ,
0065	Factory Mutual Insurance Company & its Affiliates	21482	05-0316605			Factory Mutual Insurance Company	RI	UIP					N 1
0065	Factory Mutual Insurance Company & its Affiliates	10014	05-0254496			Affiliated FM Insurance Company	RI	IA	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company	N 1
0065	Factory Mutual Insurance Company & its Affiliates	10316	05-0284861			Appalachian Insurance Company	RI		FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company	N 1
0000	Factory Mutual Insurance Company & its Affiliates	00000	AA-1120610.			FM Insurance Company Limited	GBR	IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	Y
	Factory Mutual Insurance Company & its Affiliates.	00000	98-0131767			Risk Engineering Insurance Company Limited	BMU	IA	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company	N
0000	Factory Mutual Insurance Company & its Affiliates	00000	AA-1370041.			FM Insurance Europe S.A	LUX		Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	Y
0000	Factory Mutual Insurance Company & its Affiliates	00000	AA-2730043.			FM Global de Mexico S.A. de C.V	. MEX	IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	Y
	Factory Mutual Insurance Company & its Affiliates	00000	20-2740839			Watch Hill Insurance Company	VT	IA	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000	05-0453751			Corporate Insurance Services, Inc			FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000				New Providence Mutual Limited			Risk Engineering Insurance Company Limited	Ownership	100.000	1	N
						Factory Mutual Insurance Company - Escritorio de			5 5 1 7			, , ,	
0000	Factory Mutual Insurance Company & its Affiliates	00000				Representação No Brasil LTDA.	BRA	IA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	Y
	Factory Mutual Insurance Company & its Affiliates		05-0520189			FM Approvals LLC		NIA	Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000				FM Engineering International Limited			FM Insurance Company Limited	Ownership	100.000		N
	Factory Mutual Insurance Company & its Affiliates	00000				FM Engineering Consulting (Shanghai) Co. Ltd			FM Global Services LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000				FM Approvals Limited			FM Approvals LLC	Ownership	100.000	Factory Mutual Insurance Company	N
0000	Factory Mutual Insurance Company & its Affiliates	00000				FM Approvals Assessoria E Representação LTDA	BRA		FM Approvals LLC	Ownership	100.000		N
0000	Factory Mutual Insurance Company & its Affiliates	00000	27-1439297			FMRE Holdings LLC			Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	N
0000	Factory Mutual Insurance Company & its Affiliates		58-2190659			TSB Loss Control Consultants, Inc			Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	Υ
	Factory Mutual Insurance Company & its Affiliates	00000	05-6009005			FMIC Holdings, Inc			Factory Mutual Insurance Company	Ownership	100.000	Factory Mutual Insurance Company	Υ
	Factory Mutual Insurance Company & its Affiliates	00000				FM Global Servicios, S.de R.L. de C.V			FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates		27-0433536			FM Global Services LLC		NIA	FMIC Holdings, Inc	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000	2. 0.00000			FM do Brasil Servicos de Prevencao de Perdas LTDA			FM Global Services LLC	Ownership	100.000	Factory Mutual Insurance Company	N
0000	Factory Mutual Insurance Company & its Affiliates	00000	04-3516902			610 Lincoln LLC			FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000	04-3516903			404 Wyman LLC			FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000	04-3516936			275 Wyman LLC	DE		FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000	20-8836334			175 Wyman LLC			FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000	04-3516937			Park Ridge Building LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000	04-3516935			93 Building LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000	20-2775533			265 Winter LLC.			FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates		27-1169682			245 Winter LLC	DE		265 Winter LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates		27-1440057			FMEC Legacy LLC.	DE		FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000	04-3516938			Neponset River LLC			FMEC Legacy LLC	Ownership	100.000		N
	Factory Mutual Insurance Company & its Affiliates	00000	27-1439297			West Glocester LLC	RI		FMEC Legacy LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates	00000	04-3516901			601 Edgewater LLC	. DE		FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates		27-1595571			285 Central Avenue, LLC.	RI		FMRE Holdings LLC	Ownership		Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates					Hobbs Brook Management LLC.			FMRE Holdings LLC	Ownership		Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates		0 + 00 10001			Hobbs Brook Limited			FMRE Holdings LLC	Ownership	100.000		N
	Factory Mutual Insurance Company & its Affiliates		45-2766487			101 Edgewater LLC			FMRE Holdings LLC	Ownership		Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates		27-1169682			401 Edgewater LLC			FMRE Holdings LLC	Ownership		Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates		27-1109002			Johnston Building LLC			FMRE Holdings LLC	Ownership	100.000		N
	Factory Mutual Insurance Company & its Affiliates		∠1-140334U			FM Global Services Colombia S.A.S.			FM Global Services LLC	Ownership		Factory Mutual Insurance Company	N
	Factory Mutual Insurance Company & its Affiliates		37 1600077			Two Ledgemont LLC			95 Hayden Mezz Owner LLC			Factory Mutual Insurance Company	
10000	Tractory without insurance company & its Affiliates	00000	37-1099077	I	I	I WO LEUGETHORI LLO	ן ט⊏	INI <i>P</i>	33 Flayuell Mezz Ownel LLG	Ownership	100.000	raciory ivididal insurance Company	N

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6 7	8	9	10	11	12	13	14	15	16
					Name of					Type of			'	
					Securities					Control			'	
					Exchange					(Ownership			Is an	
					if Publicly					Board,	If Control is		SCA	
		NAIC			Traded	Names of		Relationship		Management,	Ownership		Filing	
Group		Company		Federal	(U.S. or	Parent, Subsidiaries		to Reporting		Attorney-in-Fact,		Ultimate Controlling	Required?	
Code	Name	Code	Number	RSSD	CIK International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
0000	Factory Mutual Insurance Company & its Affiliates	00000	46-0627887			95 Hayden LLC	DE		FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N '	
0000	Factory Mutual Insurance Company & its Affiliates	00000	46-0639741			95 Hayden Lender LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates	00000	46-0655775			95 Hayden Mezz Owner LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates	00000	46-0644539			95 Hayden Mezz Lender LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates	00000	46-1609795			3460 Preston Ridge, LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates		46-1737956			1301 Atwood LLC			FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates	00000	38-3942900			81 Wyman LLC			FMRE Holdings LLC	Ownership		Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates	00000	30-0871090			Hobbs Solar 1 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates	00000	38-3982389			Hobbs Solar 2 LLC	DE		FMRE Holdings LLC	Ownership		Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates	00000	32-0486346			Hobbs Solar 3 LLC	DE	NIA	FMRE Holdings LLC	Ownership			N	
0000	Factory Mutual Insurance Company & its Affiliates	00000				FM Asia Holdings Pte. Ltd	SGP	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates	00000	30-0939299			Green Street Plaza LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates		35-2566166			Hobbs Solar 4 LLC	DE	NIA	FMRE Holdings LLC	Ownership			N	
0000	Factory Mutual Insurance Company & its Affiliates	00000				FM Engineering Egypt LLC	EGY	NIA	FM Engineering International Limted	Ownership			N	
0000	Factory Mutual Insurance Company & its Affiliates	00000	30-0965702			343 WInter Bldg LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
0000	Factory Mutual Insurance Company & its Affiliates	00000				FM Approvals Europe Limited	IRL	NIA	FM Approvals LLC	Ownership	100.000	Factory Mutual Insurance Company	N	
3 0000	Factory Mutual Insurance Company & its Affiliates	00000	38-4085564			Hobbs Solar 5 LLC	DE	NIA	FMRE Holdings LLC	Ownership	100.000	Factory Mutual Insurance Company	N	

Aster Explanation

Pool Participants: Factory Mutual Insurance Company (86%), Affiliated FM Insurance Company (12%), and Appalachian Insurance Company (2%).

			Current Year to Date		4
	Lines of Business	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	Prior Year to Date Direct Loss Percentage
	Fire			0.000	
	Allied lines			0.000	
-	Farmowners multiple peril			0.000	
	Homeowners multiple peril			0.000	
	Commercial multiple peril			0.000	
6.	Mortgage guaranty			0.000	
	Ocean marine			0.000	
9.	Inland marine			0.000	
	Financial guaranty			0.000	
	Medical professional liability - occurrence			0.000	
	Medical professional liability - claims-made			0.000	
12.	Earthquake			0.000	
13.	Group accident and health			0.000	
14.	Credit accident and health			0.000	
15.	Other accident and health			0.000	
16.	Workers' compensation			0.000	
17.1	Other liability-occurrence.			0.000	
17.2	Other liability-claims made			0.000	
17.3	Excess workers' compensation	NI.()		0.000	
18.1	Products liability-occurrence			0.000	
18.2	Products liability-claims made			0.000	
19.1.	19.2 Private passenger auto liability			0.000	
	19.4 Commercial auto liability			0.000	
	Auto physical damage			0.000	
	Aircraft (all perils)			0.000	
	Fidelity			0.000	
	Surety			0.000	
	Burglary and theft			0.000	
	Boiler and machinery			0.000	
	Credit			.0.000	
	International			0.000	
	Warranty			0.000	
	Reinsurance-nonproportional assumed property	XXX	XXX	XXX	XXX
	Reinsurance-nonproportional assumed liability	XXX	XXX	XXX	XXX
		XXX	XXX	XXX	XXX
	Aggregate write-ins for other lines of business	0	0	0.000	/VV\
	Totals		0	0.000	
55.	1000	DETAILS OF WRITE-INS			
3401.				0.000	
				0.000	
				0.000	
			0	0.000	XXX
	Totals (Lines 3401 thru 3403 plus 3498) (Line 34)		0	0.000	

	PART 2 - DIRE	CT PREMIUMS WE	RITTEN	
	Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire			
2.	Allied lines			
3.	Farmowners multiple peril			
4.	Homeowners multiple peril			
5.	Commercial multiple peril			
	Mortgage guaranty			
	Ocean marine			
	Inland marine			
	Financial quaranty			
	Medical professional liability - occurrence			
	Medical professional liability - claims made			
	Earthquake			
	Group accident and health			
	Credit accident and health			
	Other accident and health			
	Workers' compensation			
	Other liability-occurrence.			
17.1	Other liability-occurrence			
17.2	Other liability-claims made			
17.3	Excess workers compensation			
10.1	Products liability-occurrence			
	Products liability-claims made			
	19.2 Private passenger auto liability			
	19.4 Commercial auto liability			
	Auto physical damage			
	Aircraft (all perils)			
	Fidelity			
	Surety			
	Burglary and theft			
27.	Boiler and machinery			
28.	Credit			
29.	International			
30.	Warranty			
31.	Reinsurance-nonproportional assumed property	XXX	XXX	XXX
32.	Reinsurance-nonproportional assumed liability	XXX	XXX	XXX
33.	Reinsurance-nonproportional assumed financial lines	XXX	XXX	XXX
	Aggregate write-ins for other lines of business		0	0
	Totals		-	0
		DETAILS OF WRITE-INS	<u> </u>	<u> </u>
3401.				
3402.				
3403.				
3498	Sum. of remaining write-ins for Line 34 from overflow page		00	0
	Totals (Lines 3401 thru 3403 plus 3498) (Line 34)		•	0

PART 3 (000 omitted)

					L(OSS AND LOSS A	ADJUSTMENT E	XPENSE RESER	RVES SCHEDULE					
		1	2	3	4	5	6	7	8	9	10	11	12	13
				T / I D :	2010	2040		Q.S. Date Known	Q.S. Date Known			Prior Year-End Known		Prior Year-End
		Prior Year-End	Prior Year-End	Total Prior Year-End	2019 Loss and LAE	2019 Loss and LAE	Total 2019	Case Loss and LAE Reserves on	Case Loss and LAE Reserves on Claims	Q.S. Date	Total Q.S.	Case Loss and LAE Reserves Developed	IBNR Loss and LAE Reserves Developed	Total Loss and LAE Reserve
Ye	ears in Which	Known Case	IBNR	Loss and	Payments on Claims		Loss and		Reported or Reopened	IBNR	Loss and LAE	(Savings)/Deficiency	(Savings)/Deficiency	Developed
	Losses	Loss and LAE	Loss and LAE	LAE Reserves	Reported as of Prior	Unreported as of	LAE Payments	Open as of Prior	Subsequent to	Loss and LAE	Reserves	(Cols. 4 + 7	(Cols. 5 + 8 + 9	(Savings)/Deficiency
	Occurred	Reserves	Reserves	(Cols. 1 + 2)	Year-End	Prior Year-End	(Cols. 4 + 5)	Year-End	Prior Year-End	Reserves	(Cols. 7 + 8 + 9)	minus Col. 1)	minus Col. 2)	(Cols. 11 + 12)
1. 2	016 + Prior	7,526	60,894	68,419	40		40	11,193		57,188	68,380	3,707	(3,706)	0
2. 2	017			0			0				0	0	0	0
	Subtotals 017 + Prior	7.526	60,894	68,419	40	0	40	11.193		57.188	68.380	3.707	(3.706)	0
	017 + P1101	7,520	00,094	00,419	40	0	40	11,193	0		00,300	3,707	(3,700)	0
4. 2	Λ1Q			0			0				0	0	0	0
4. 2	010			0			0				0	0	0	0
5 5	Subtotals													
	018 + Prior	7,526	60,894	68,419	40	0	40	11,193	0	57,188	68,380	3,707	(3,706)	0
													, ,	
6. 2	019	XXX	XXX	XXX	XXX	10,763	10,763	XXX			0	XXX	XXX	XXX
7. T	otals	7,526	60,894	68,419	40	10,763	10,803	11,193	0	57,188	68,380	3,707	(3,706)	0
-	rior Year-											Col. 11, Line 7	Col. 12, Line 7	Col. 13, Line 7
	ind's Surplus											As % of Col. 1,	As % of Col. 2,	As % of Col. 3,
	s Regards Policyholders	187,376										Line 7	Line 7	Line 7
	UIICYTIUIUEIS	101,310												

Col. 13, Line 7 Line 8

Statement for March 31, 2019 of the APPALACHIAN INSURANCE COMPANY SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

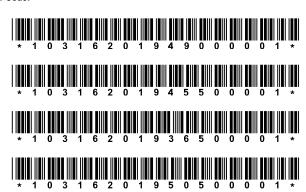
The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		поороно
1.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

Explanation:

- The data for this supplement is not required to be filed.
- The data for this supplement is not required to be filed.
- The data for this supplement is not required to be filed.
- The data for this supplement is not required to be filed.

Bar Code:



Statement for March 31, 2019 of the APPALACHIAN INSURANCE COMPANY Overflow Page for Write-Ins

Additional Write-ins for Liabilities:

	1 Current Statement Date	2 December 31, Prior Year
2904. 2905		
2997. Summary of remaining write-ins for Line 29.	0	0

Additional	Write-ine	for	l iahilitiae:
Auditional	44116-1119	ıvı	Liavillucs.

	1	2
	Current	December 31,
	Statement Date	Prior Year
3204		
3205.		
3297. Summary of remaining write-ins for Line 32	0	0

Statement for March 31, 2019 of the APPALACHIAN INSURANCE COMPANY SCHEDULE A - VERIFICATION

Real Estate

	Noai Estate		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	
2.			
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	2.1 Actual cost at time of acquisition 2.2 Additional investment made after acquisition Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted carrying value		
7.	Deduct current year's other-than-temporary impairment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8)		0
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)	0	0

SCHEDULE B - VERIFICATION

Mortgage Loans

	Wortgage Loans		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	0	
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Capitalized deferred interest and other Accrual of discount Unrealized valuation increase (decrease)		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage interest points and commitment fees		
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest		
10	Deduct current year's other-than-temporary impairment recognized		
11	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12			
13	Subtotal (Line 11 plus Line 12)	0	0
14	Deduct total nonadmitted amounts		
15			0

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

Other Long Term invested 7 tosets		
	1	2
		Prior Year Ended
	Year to Date	December 31
Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
2.2 Additional investment made after acquisition. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7 Deduct amounts received on disposals		
8. Deduct amortization of premium and depreciation		
Deduct amortization of premium and depreciation. Total foreign exchange change in book/adjusted carrying value.		
10. Deduct current year's other-than-temporary impairment recognized		
Deduct current year's other-than-temporary impairment recognized	0	0
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	209,197,728	220,761,238
2.	Cost of bonds and stocks acquired	14,796,051	14,779,418
3.	Accrual of discount	23,449	75,735
4.	Unrealized valuation increase (decrease)	4,914	(4,914)
5.	Total gain (loss) on disposals	(297,368)	(86,877)
6.	Deduct consideration for bonds and stocks disposed of	16,496,511	26,038,364
7.	Deduct amortization of premium	59,959	315,748
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		27,240
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	207,168,304	209,197,728
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	207,168,304	209,197,728

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

				eferred Stock by NAIC I				T - 1
	Book/Adjusted Carrying	2 Acquisitions	3 Dispositions	4 Non-Trading Activity	5 Book/Adjusted Carrying	6 Book/Adjusted Carrying	/ Book/Adjusted Carrying	8 Book/Adjusted Carrying
	Value Beginning	During	During	During	Value End of	Value End of	Value End of	Value December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
NAIC 1 (a)	191,293,230	10,936,275	15,294,725	1,463,201	188,397,981			191,293,230
HA10.0 ()	44 400 440	0.050.770	100 150	(4, 400, 7,47)	40.070.004			44 400 440
NAIC 2 (a)	14,409,448	3,859,776	499,153	(1,499,747)	16,270,324			14,409,448
NAIC 3 (a)	005.050		1 000 000	4.050	0			995,050
NAIC 3 (a)	995,050		1,000,000	4,950	0			993,030
NAIC 4 (a)					0			
10 10 7 (u)							***************************************	
NAIC 5 (a)					0			
()								
NAIC 6 (a)					0			
Total Bonds	206,697,728	14,796,051	16,793,878	(31,596)	204,668,305	0	0	206,697,728
PREFERRED STOCK								
NAIC 1	2,500,000				2,500,000			2,500,000
NAIC 2					0			
NAIC 3					0			
NAIC 3								
NAIC 4					0			
1W IIV 7					0			
NAIC 5					0			
NAIC 6					0			
Total Preferred Stock	2,500,000		0	0	2,500,000	0	0	2,500,000
Total Bonds and Preferred Stock	209,197,728	14,796,051	16,793,878	(31,596)	207,168,305	0	0	209,197,728

⁽a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$.........0; NAIC 2 \$........0; NAIC 3 \$.........0; NAIC 4 \$.........0; NAIC 5 \$..........0.

Sch. DA - Pt. 1 NONE

Sch. DA - Verification NONE

Sch. DB - Pt. A - Verification NONE

Sch. DB - Pt. B - Verification NONE

Sch. DB - Pt. C - Sn. 1 NONE

Sch. DB - Pt. C - Sn. 2 NONE

Sch. DB - Verification NONE

QSI03, QSI04, QSI05, QSI06, QSI07

Statement for March 31, 2019 of the APPALACHIAN INSURANCE COMPANY SCHEDULE E - PART 2 - VERIFICATION

Cash Equivalents

Cash Equivalents		
	1 Year To Date	2 Prior Year Ended December 31
Book/adjusted carrying value, December 31 of prior year	41,327,204	78,044,772
Cost of cash equivalents acquired	252,575	1,020,898
Accrual of discount		
Unrealized valuation increase (decrease)	11,928	7,052
Total gain (loss) on disposals	470	(2,999)
Deduct consideration received on disposals	5,000,000	37,742,519
7. Deduct amortization of premium		
Total foreign exchange change in book/ adjusted carrying value		
Deduct current year's other-than-temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	36,592,177	41,327,204
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	36,592,177	41,327,204

Sch. A Pt. 2 NONE

Sch. A Pt. 3 NONE

Sch. B - Pt. 2 NONE

Sch. B - Pt. 3 NONE

Sch. BA - Pt. 2 NONE

Sch. BA - Pt. 3 NONE

SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

			0.11	wing all Long Term Bonds and Glocks Acquire	Banning Garronic Quartor								
1	2	3	4	5	6	7	8	9	10				
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation and Administrative Symbol/Market Indicator (a)				
Bonds - Industrial and Miscellaneous													
023135 BC 9 AMAZON COM II	IC		01/15/2019	JP MORGAN		486,115	500,000	6,344	1FE				
035240 AQ 3 ANHEUSER-BUS	CH		01/15/2019	JP MORGAN		506,765	500,000		2FE				
06051G HF 9 BANK AMER CO	RP		01/28/2019	MK TAXES SYS		1,496,565	1,500,000	21,448	1FE				
12636Y AC 6 CRH AMERICA F	INANCE		01/16/2019	BARCLAYS		474,530	500,000	5,706	2FE				
17325F AS 7 CITIBANK NA N	′		01/15/2019	CITIGROUP		1,248,300	1,250,000		1FE				
29379V BT 9 ENTERPRISE PF	ODS		01/15/2019	WELLS FARGO		251,420	250,000	2,767	2FE				
369550 BC 1 GENERAL DYNA	MICS CORP		01/15/2019	GOLDMAN SACHS		760,095	750,000	4,844	1FE				
46647P BA 3 JP MORGAN CH	ASE BANK		01/22/2019	JP MORGAN		1,700,000	1,700,000		1FE				
49327M 2X 1 KEYBANK NATIO	NAL		01/24/2019	KEYBANC		499,775	500,000		1FE				
501044 DJ 7 KROGER CO			01/17/2019	CITIGROUP		472,745	500,000	8,788	2FE				
548661 DP 9 LOWES COS INC			01/16/2019	USBCORP		462,170	500,000	3,229	2FE				
617446 8G 7 MORGAN STANI	EY		01/17/2019	MORGAN STANLEY		1,250,000	1,250,000		1FE				
693475 AV 7 PNC FINANCIAL	SERVICE		01/17/2019	MORGAN STANLEY		498,865	500,000		1FE				
806851 AJ 0 SCHLUMBERGE	R HLDGS		01/28/2019	JP MORGAN		997,920	1,000,000		2FE				
907818 ED 6 UNION PACIFIC	CORP		01/16/2019	WELLS FARGO		982,760	1,000,000	13,813	1FE				
92343V DY 7 VERIZON COMM	UNICATION		01/17/2019	CITIGROUP		503,560	500,000	7,219	2FE				
95000U 2C 6 WELLS FARGO	CO		02/12/2019	VARIOUS		2,013,800	2,000,000	2,083	1FE				
96949L AD 7 WILLIAMS PART	NERS		01/15/2019	MK TAXES SYS		190,666	200,000	665	2FE				
3899999. Total - Bonds - Industrial a	nd Miscellaneous					14,796,051	14,900,000	76,906	XXX				
8399997 Total - Bonds - Part 3						14,796,051	14,900,000	76,906	XXX				
8399999. Total - Bonds						14,796,051	14,900,000	76,906	XXX				
9999999. Total - Bonds, Preferred at	d Common Stocks					14,796,051	XXX	76,906	XXX				

⁽a) For all common stock bearing NAIC market indicator "U" provide the number of such issues:..............0.

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

г		4		2 4	59		7	0		40		Charas :- D	I - / A - II I I I I	Name and Males	1	10	47	10	10	20	21	20
		1	2	3 4	5	ь	1	ď	9	10	11	onange in Bi	ook/Adjusted (Carrying Value	15	16	17	18	19	20	21	22
	OLIOID III	1175		F o r ei g Disposal	New (Bulletin	Number of	Outline	Por Vel	Adadout	Prior Year Book/Adjusted	Unrealized Valuation Increase	Current Year's (Amortization)	Current Year's Other-Than- Temporary Impairment	Total Change in B./A.C.V.	Total Foreign Exchange Change in	Book/Adjusted Carrying Value at		Realized Gain (Loss)	Total Gain (Loss) on	Bond Interest / Stock Dividends Received	Stated Contractual Maturity	NAIC Designation and Admini- strative Symbol/ Market
-	CUSIP Id			n Date	Name of Purchaser	Shares of Stock	Consideration	Par Value	Actual Cost	Carrying Value	(Decrease)	/ Accretion	Recognized	(11+12-13)	B./A.C.V.	Disposal Date	on Disposal	on Disposal	Disposal	During Year	Date	Indicator (a)
			overnment	T																		
	36179M				MORTGAGE PAYDOWN		68,960	68,960	75,210	69,009		(49)		(49)		68,960			0		02/20/2043.	
					MORTGAGE PAYDOWN		2,251	2,251	2,300	2,252				0		2,251			0		02/15/2032.	
L			3 U S TREASURY	01/08/2019.	WELLS FARGO		9,745,703	10,000,000	10,176,563	10,062,943		(403)		(403)		10,062,540		(316,837)	(316,837)	,	05/15/2022.	
L	0599999.		Total - Bonds - U.S. Government				9,816,914	10,071,211	10,254,073	10,134,204	0	(452)	0	(452)	0	10,133,751	0	(316,837)	(316,837)	27,195	XXX	XXX
	Bonds - I	U.S. Sp	pecial Revenue and Special Assessment																			
	31296S	M5	2 FHLMC	03/01/2019.	MORTGAGE PAYDOWN		2,659	2,659	2,754	2,659				0		2,659			0	27	01/01/2034.	1
	31297T	WF	6 FHLMC PC	03/01/2019.	MORTGAGE PAYDOWN		3,447	3,447	3,296	3,447		1		1		3,447			0	29	09/01/2035.	1
	31411A	JG	1 FEDERAL NATL MG	02/01/2019.	VARIOUS		1,500	1,500	1,509	1,500				0		1,500			0	15	11/01/2036.	1
	31419A	DS	3 FNMA PASS-THRU LNG 30 Y	02/01/2019.	VARIOUS		5,898	5,898	6,426	5,903		(5)		(5)		5,898			0	59	09/01/2039.	1
Г	3199999.		Total - Bonds - U.S. Special Revenue and Special	Assessments.			13,504	13,504	13,985	13,509	0	(4)	0	(4)	0	13,504	0	0	0	130	XXX	XXX
_	Bonds - I	Industr	rial and Miscellaneous																			
Ī	03523T	BB	3 ANHEUSER BUSCH INBEV WORLD	02/11/2019.	CORPORATE REORG		511,430	500,000	496,415	499,109		44		44		499,153		12,277	12,277	10,694	02/15/2021.	2FE
	06051G	EX	3 BANK AMER CORP	01/15/2019.	MATURITY		1,000,000	1,000,000	999,830	999,998		2		2		1,000,000			0	13,000	01/15/2019.	1FE
	46625H	HU	7 JPMORGAN CHASE & CO	01/28/2019.	KEYBANC		254,663	250,000	238,053	247,356		114		114		247,470		7,192	7,192	3,099	10/15/2020.	1FE
QE0			NEW YORK LIFE GLOBAL FDG				,	, , ,	,	,						,						
Ш	64952W	BQ		01/02/2019.	VARIOUS		1,550,000	1,550,000	1,548,218	1,549,999		1		1		1,550,000			0	16,275	01/02/2019.	1FE
20	94974B			01/15/2019.	VARIOUS		2,350,000	2,350,000	2,344,854	2,349,959		41		41		2,350,000			0	25,263	01/15/2019.	1FE
•			6 XEROX CORP	03/15/2019.			1,000,000	1,000,000	999,150	995,050	4,914	36		4,950		1.000.000			0	,	03/15/2019.	
-	3899999.		Total - Bonds - Industrial and Miscellaneous				6.666.093	6,650,000	6.626.520	6.641.471	4.914	238	0	5.152	0	6.646.623	0	19.469	19.469	82.081	XXX	XXX
-	3399997.		Total - Bonds - Part 4				16,496,511	16,734,715	16.894.578	16,789,184	4,914	(218)	0	4.696	0	16,793,878	0	(297,368)	(297.368)	109.406	XXX	XXX
H	3399999.		Total - Bonds				16,496,511	16,734,715	16.894.578	16,789,184	4,914	(218)	0	4,696	0	16.793.878	0	(297,368)	(297,368)	109,406	XXX	XXX
H	99999999.		Total - Bonds. Preferred and Common Stocks				16.496.511	XXX	16.894.578	16.789.184	4.914	(218)	0	4.696	0	16.793.878	0	(297.368)	(297.368)	109.406	XXX	XXX

⁽a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues:0.

Sch. DB - Pt. A - Sn. 1 NONE

Sch. DB - Pt. B - Sn. 1 NONE

Sch. DB - Pt. D - Sn. 1 NONE

Sch. DB - Pt. D - Sn. 2 NONE

SCHEDULE DL - PART 1 SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets reported in aggregate on one Line 10 of the Assets page and not included on Schedules A. B. BA. D. DB and E.)

	(Sec	un	ies lending collateral assets reported in aggregate on one Line 10 of the Assets p	age and	not included	on Schedules A,	D, DA, D, DD allo	⊏.)
1			2	3	4	5	6	7
					NAIC Designation and Administrative Symbol / Market		Book/Adjusted	Maturity
CUSIP Ide	ntificati	on	Description	Code	Indicator	Fair Value	Carrying Value	Date
Cash Equiva	lents (Sche	dule E Part 2 Type)					
000000	00	0	SOCIETE GENERALE NY BRANCH	C		1,112,875	1,112,875	03/25/2019
000000	00	0	NATWEST MARKETS SECURITIES INC	C		1,100,000	1,100,000	03/25/2019
000000	00	0	HSBC SECURITIES,INC	C		800,000	800,000	03/25/2019
000000	00	0	ML PIERCE FENNER & SMITH INC	C		600,000	600,000	03/25/2019
000000	00	0	NATIXIS NEW YORK BRANCH	C		500,000	500,000	03/25/2019
000000	00	0	MIZUHO SECURITIES USA INC	C		500,000	500,000	03/25/2019
000000	00	0	PERSHING LLC	C		500,000	500,000	03/25/2019
9199999.	Total		sh Equivalents (Schedule E Part 2 Type)			5,112,875	5,112,875	XXX
9999999.	Total	3				5,112,875	5,112,875	XXX

General Interrogatories:

- 2.
- 3.

SCHEDULE DL - PART 2 SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets included on Schedules A. B. BA. D. DB and F and not reported in aggregate on Line 10 of the Assets page)

(Sect	unities lending collateral assets included on schedules A, B, BA, D, DB and E and	not repor	ted in aggre	gate on Line 10 0	i the Assets page).
1	2	3	4	5	6	7
0.000			NAIC Designation and Administrative Symbol / Market	5	Book/Adjusted	Maturity
CUSIP Identification	Description	Code	Indicator	Fair Value	Carrying Value	Date

General Interrogatories:

The activity for the year: Fair Value \$..........0 Book/Adjusted Carrying Value \$.........0

Average balance for the year: Fair Value \$.........0 Book/Adjusted Carrying Value \$........0

NONE

Statement for March 31, 2019 of the APPALACHIAN INSURANCE COMPANY SCHEDULE E - PART 1 - CASH

N A 41-	E	D '4	D-1
iviontn	⊨na	Depository	Balances

		op o onton j	Dalarioco					
1	2	3	4	5	Book Balance at End of Each			9
					Month During Current Quarter			
					6	7	8	
			Amount of Interest Received During	Amount of Interest Accrued at Current				
Depository	Code	Rate of Interest	Current Quarter	Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
JP MORGAN CHASE NEW YORK, NY		0.800	66,666		18,500,423	14,324,684	7,784,981	XXX
0199998. Deposits in1 depositories that do not exceed the allowable limit								
in any one depository (see Instructions) - Open Depositories	XXX	XXX			(311)	(3,181)	(506)	XXX
0199999. Total Open Depositories	XXX	XXX	66,666	0	18,500,112	14,321,503	7,784,475	XXX
0399999. Total Cash on Deposit	XXX	XXX	66,666	0	18,500,112	14,321,503	7,784,475	XXX
0599999. Total Cash	XXX	XXX	66,666	0	18,500,112	14,321,503	7,784,475	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

Show invocations owned that of outlong grants									
1	2	3	4	5	6	7	8	9	
							Amount of Interest Due &		
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date Bool	k/Adjusted Carrying Value	Accrued	Amount Received During Year	
All Other Money Mar								_	
09248U 61 9	BLACKROCK LIQUIDITY TEMPFUND INST'L		02/28/2019	2.530		36,592,177		232,066	
	Ither Money Market Mutual Funds					36,592,177	0	232,066	
8899999. Total - Cas	h Equivalents	<u> </u>				36,592,177	0	232,066	